Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

> REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

erator Well A								PI No. 30-025-12005			
HAL J. RASMUSSEN OPERATING, INC.									30-025-12005		
Address 310 WEST WALL, SUITE	906 MI	DI AND	). TEX	XAS 797	01					!	
Reason(s) for Filing (Check proper box)	500, 113	0271170				t (Please explai	in)				
New Well	(	Change in	Transpor	nter of:	_						
Recompletion	E	EFFECTIVE: January 1, 1993									
Change in Operator X	Casinghead	Gas	Conden	sate		WER CT	SHITE	2403,DENVE	R. CO	80202	
f change of operator give name LL and address of previous operator	K ENERG	T CURP	UKAT	101, 10	DZJ LAKI	1LIX 31.9	30112				
II. DESCRIPTION OF WELL.	AND LEA	SE									
Lease Name	e Name Well No. Pool Name, Includ				ng Formation gh, Yates-7 Rivers			Kind of Lease State: Federal or ReeX		Lease No. LC-030168-A	
EAVES A		6	Sca	rboroug	gn, rates	-/ Rivers	S	Leneral OX MACV	20-0.		
Location Unit Letter	. 660		. Feet Fn	om The No	orth Line	and66	) Fe	et From The	<u>;                                    </u>	Line	
Section 19 Township	26 S	outh	Range	37 Ea		ирм.		LE	ΕΑ	County	
Section 19 Township	20 3	Ou cii	Range		, 141	ALIVI,				County	
III. DESIGNATION OF TRAN				D NATUI	RAL GAS				<del> </del>	<del></del>	
Name of Authorized Transporter of Oil	<b>&gt;</b>	or Conden	sale		Address (Giv	e address to wh	iich approved	copy of this form	is to be se	int)	
Eatt Energy Coy	bard Car	( - A)	or Dry	Gos [	Address (Civ	a address to wh	ich approved	copy of this form	ie to he sa	ent)	
Name of Authorized Transporter of Casing	phead Gas		or Dry	Jas	Address (GIV	e aucuress 10 WA	ист ирргочеа	Lopy of this jorm	<b>∞ ₩ 0€ 5€</b>	····/	
If well produces oil or liquids,					Is gas actually	y connected?	When	?			
give location of tanks.	ve location of tanks.						l				
If this production is commingled with that IV. COMPLETION DATA	from any othe	r lease or	pool, giv	e commingl	ing order num	Der:					
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Completion		Dandy to	Dend.		Total Depth	<u> </u>	l	DRTD		_1	
Date Spudded	Date Compl	i. Keady u	o Pioa.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations					L			Depth Casing Shoe			
	T	UBING,	CASI	NG AND	CEMENTI	NG RECOR	D				
HOLE SIZE	ING & T	UBING S	SIZE	DEPTH SET			SACKS CEMENT				
·	<del>                                     </del>										
	<del> </del>	····							<del></del>		
V. TEST DATA AND REQUE								:	£.!! 34 b	\	
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Tes		of loaa	ou ana musi		ethod (Flow, pu			uti 24 nou	<i>vs.)</i>	
Date The Now On Real To Talk	Date of Tes	•					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
Length of Test	Tubing Pressure				Casing Press	ure		Choke Size			
	Test Oil - Bbls.				Water - Bbls			Gas- MCF			
Actual Prod. During Test					Water - Bors	•					
GAS WELL	1	<del></del>	····		<del></del>						
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conde	sate/MMCF		Gravity of Condensate			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
THE OPEN ABOVE CONTRACTOR	A TEL OF	001.0	DY Y 4 3	ICE	1						
VI. OPERATOR CERTIFIC		-		NCE	(	OIL CON	<b>ISERV</b>	ATION D	IVISIO	NC	
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above						C. 2. 2. 3. 323					
is true and complete to the best of my	knowledge ar	nd belief.			Date	Approve	ed				
JANO JA.	444-6				H			-			
Signature Hala Denamina						By ORIGINAL SIGNED BY JELL SEXTON					
Hal J. Rasmus	sen, Pr	es i der		<del></del>							
Printed Name 02-25-93	1	915) (	Title 587-1	664	Title						
Date			lephone l								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

MAR 0 & 1993

新发生的 \$ 100 mm \$ 100